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**SYMPOSIUM: NATIONAL NETWORK OF INTEGRATED CONTINUOUS CARE: EVOLUTION OF THE DEPENDENTS HEALTH PROFILE.**

(Symposium composed of 6 communications)

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**Comunication 2**

**DEPENDENTS ADMITTED TO CU AND MTRU: A COMPARATIVE STUDY ON HEALTH CONDITION EVOLUTION**

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## ABSTRACT

**Introduction:** Convalescence Units (CU) and Medium Term and Rehabilitation Units (MTRU) are the National Network Integrated Continuous Care (NNICC) internment units which, by their referentiation criteria, have dependents with higher autonomy reconstruction potential.

**Objective:** Compare the health condition evolution among dependents admitted on Convalescence Units (CU) and Medium Term and Rehabilitation Units (MTRU).

**Material and Methods:** Exploratory study of quantitative profile with an inter-subject and intra-subject design. A sample of 425 cases: 265 admitted in two CU and 160 in a MDRT of Minho, Portugal. Was applied the form "Profile of dependents integrated in NNICC providers" in admission (A) and clinical discharge (D), for 1 year (between 2013 and 2014).

**Results:** Dependents on CU have on average lower dependence time, higher autonomy reconstruction potential, less acute exacerbations with need for the hospital; no deaths (against 8 in MTRU). In MTRU there is a higher % of: pressure ulcers, joint stiffness and ineffective coughing. In an inter-subject evaluation, dependents on the CU are less dependent on self-care, in A [ $t(423)=7.080$ ,  $p<.001$ ], and D [ $t(365)=11.29$ ,  $p<.001$ ]; lower bodily processes commitment either in A [ $t(423)=2.146$ ,  $p=.032$ ], and D [ $t(365)=5.351$ ,  $p<.001$ ]. In an intra-subject evaluation, on CU there are a higher number of cases with positive development between admission and discharge, on the dependency level and bodily processes commitment.

**Conclusion:** The dependents admitted on CU have better health condition and positive evolution compared to those admitted to MTRU.

**Keywords:** Self-care, Bodily processes, CU, MTRU, NNICC